

## SOME ASPECTS OF HEALTH CARE IN MEDIEVAL INDIA

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**ABSTRACT:** *It appears that from medieval period onwards the subjects having practical application were given more importance than the philosophical and theoretical aspects. But the physicians were keen observers and new drugs and information were added and the effect of religion, astrology and other systems is also seen. While the womenfolk used to collect from the nearby forests, drugs that were useful for common ailments, some drugs were also imported from other countries. Specialization in certain diseases or practices was prevalent and the physicians enjoyed a high status and respect in the society. Several such other aspects are dealt with in this article.*

### INTRODUCTION

Ancient Ayurvedic texts laid equal emphasis on the theoretical concepts and philosophical background, which formed the basis of the science. As centuries passed on, the importance of theoretical and philosophical concepts was reduced and by the recent centuries this section almost disappeared. The applied aspects like material medical, diagnosis, treatment, and preparation of medicines gained importance.

During late medieval period works of the nature of compilations dealing only with diagnosis and treatment and with material medica or independent diseases and topics like dietetics appeared. However, commentaries on earlier classics also were rarely written. Some aspects are dealt within this article which is based on the evidences of South India in general and Andhra in particular.

### Observations and Research

Though the physicians of this period lacked interest or knowledge of theoretical concepts, they were keen observers. Several new drugs which were brought by the foreign invaders and traders were administered, effects observed and the results recorded in the texts for the benefit of future generations. New effects of already known drugs and new combinations of compound medicines were noted. Sarnghadhara appears to be the first to record such observations and later this practice continued<sup>1</sup>. Hejibu Ramanna of 17<sup>th</sup> century advised the practitioners to be in touch with the new developments in the use of drugs and to have discussions with monks, *Yogis*, *rasavadins*, medical scholars, *pauranikas* and also foreign physicians and to exchange views with them<sup>2</sup>. This shows the inquisitive mind of the practitioners.

## **Influence of other sciences**

This period has seen the influence of yoga, *tantra*, astrology and religion apart from other systems and traditions. The feeling of pulse as a means of diagnosis, started a few centuries earlier, became very popular in this period. It is the effect of *yoga* and *tantra* or *Siddha* system according to different scholars. Independent monographs appeared on *nadi*. Texts like *Ayurvedasara* of 17 – 18 century mention the ten types of *vayu* while ignoring the 5 types of *pitta* and *kapha*, showing the influence of *yoga* and *tantra* texts<sup>3</sup>.

## **Astasthanapariksa**

In South India there appeared an amalgamation of the traditions – the *Brahmin* tradition of Caraka, Susruta and others, *rasa* tradition said to be revealed by Siva and described in *Rasarnava* etc. and the third *Siddha* tradition revealed by Agastya. “The examination of the eight places” appears to be the result of this confluence. *Pancalaksananidana* (diagnosis based on five manifestations) gradually gave place to *astasthanaparkisa*. It can be argued that this is covered in classics directly or indirectly. An inspiration of Coda Tikkaraja (1245) records the pharmacological procedures like

## **Regional Languages**

With the dwindling importance of philosophical and theoretical concepts, the importance of Sanskrit was also reduced. Significant observations were recorded in regional languages leading to several compilations in regional language which replaced the Sanskrit treatises and became very popular.

## **Folklore**

but its independent and popular status is more significant in this period. Vallabhacarya and the famous anonymous work *Yogarathnakara*<sup>4</sup> also mention this. This continued to have its significance and finds place in all compilations of the subsequent centuries, though they neglected other concepts.

## **Astrology and religion**

Astrology and religion used to play an important role in the treatment and prognosis of the diseases. The emergence of *karmavipaka* as a section of medicine and the compilation of an independent work, *Madanamaharnava*\* (\*published in Gaekwad oriental series, Baroda) reveals its popularity. Several texts which were popular as manuals of practitioners do not fail to mention *Karmavipaka* of disease along with suggestive propitiatory rites. This tradition can be still observed in rural hereditary practitioners. In the same way use of *mantras* (chanting) and talismans by practitioners who use *mantras* and **talismans**, particularly in diseases of children. Interestingly one Muslim practitioners was also observed to use Sanskrit and Telugu *Mantras*.

*rasavada*, *padanjana*, *kanyakavada*, *dhumravada* and *garudavada* etc<sup>5</sup>.

The scientific study was neglected and practice from generation to generation continued. Some specialists had retained certain specific effective recipes and practiced. The existence of folklore, though denounced as unscientific, cannot be denied and its significance of also cannot be ignored. An interesting episode of a successful folklore treatment, in a case, where other systems failed may be mentioned here. Jahanara, the daughter of

Shah Jahan, sustained serious burn injuries on 26<sup>th</sup> March, 1644. Every physician of note from far and near treated her in vain. The emperor was in anguish and was always at her bed side. The physician of the then late Persian king, happened to visit Agra twenty days after the mishap and treated her; as also the Hakim Mumena, the Royal Physician of Delhi. There was no relief. A slave named Arif prepared an ointment, which entirely healed the sores of the princess in two months, while there was no relief even after treatment for four months by others<sup>6</sup>. This anecdote is based on *Padshahnamah* of Abdul Hamid. It supports the existence of folklore practices, which are effective and based on local drugs. The wife of Yajnadatta, a minister, worshipped Siva to beget a child. She wore medicinal roots and some precious stones. *Sivaratrimahatmyam*, a work in Telugu reflecting the social life of the period mentions this<sup>7</sup>. The effects should be made to collect such practices and recipes and local health traditions.

### Transmission of the science

Ayurveda was transmitted from generation to generation among rural and lower strata of the society. Among the learned and affluent, imparting of Ayurvedic education under a preceptor continued like the study of other Sastras. European travelers during the Vijaynagara period mentioned in their accounts that students from other countries came here to study Ayurveda<sup>8</sup>. Such institutions were run by well known physicians who were granted gifts by the kings. Some institutions were also attached to temples or mathas or religious institutions. The Akkalapudi (1326) Ponnupalli (1404), Kaluvaceru (1423), Daksarama (1430) and Kondavidu (1546) grants record such gifts. Mudumba Venkatacharya, the author of

*Rasapradiprika* (in Telugu) of 17<sup>th</sup> c, mentions that he studied medicine in the temple-college at the Narasimha temple at Vedadri on the banks of river Krishna<sup>9</sup>.

The Saivas and Vaishnavas, denouncing the caste system tried to bring all the people to their fold and imparted education to all. Virakrsnudu, author of **Kaycikitsalu** who was a shepherd (golla) by caste became a great scholar in Ayurveda under the guidance of Sudarsanacaryulu of Srisaila family<sup>10</sup>. It is also true that Ayurveda was imparted from father to son. Edward Iver who visited India around 1755, says “like the other castes, the son of a doctor is a doctor and so he will continue to be from generation to generation<sup>11</sup>”. Due to the rise of European rule, encouragement for local medical system was reduced and the learning of medical texts and other allied sciences in Sanskrit and Telugu was not given much attention. This is also evident from the account of, Edward Iver, again who continued “all their medical knowledge was in their written accounts which they never study but continue the profession from generation to generation<sup>12</sup>”. This state of affairs might have led to the compilation of works very useful for the day today practice. *Bahatagrantha*, *Vaidyacintamani*, *Bhosajakalpamu*, *Basavarajiyamu* etc. which are of this type were widely read and followed and they replaced the earlier classical texts.

Experience under well known and competent physician preceptors was given due importance for perfection in the science. Sarabharaja of 17<sup>th</sup> C. mentioned that he studied under many gurus<sup>13</sup>. *Panakalaraya*, the author of *Netradarpanamu*, a monograph on eye diseases, states that he satisfied the kings with his knowledge in medicine and was honoured by many kings<sup>14</sup>. This suggests

that authors compiled treatises only after they got due recognition.

### **Status and specialization**

Though Ayurveda is divided into 8 *angas* (branches), it appears that this specialization was not found among practitioners. Some physicians by their experience, interest and research became wellknown for certain methods. Some were known as experts in treating eye diseases while some others on Children's diseases; some were famous for diagnosis on the basis of *nadi*. As already mentioned, some were popular for *mantras* and talismans and in treating psychosomatic and psychiatric ailments. Such practitioners were called *bhutavaidyas* and description of and references to *bhutavaidyas* and description of and references to *bhutavaidyas* are available in literature<sup>15</sup>. Apart from treating human beings, there were specialists in veterinary medicine also. On the basis of inscriptional and literary sources the following five categories of physicians are known to have existed.

1. *Naravaidyas*<sup>16</sup> – for human beings
2. *Gajavaidyas* – for elephants
3. *Asvavaidyas* – for horses
4. *Pasavaidyas* – for cattle and
5. *Bhutavaidyas*

Unlike the physicians of high stature, the practitioners of lower status and *bhutavaidyas* used to sit and extend their relief to the needy. Tavernier says thus “in great cities there may be one or two men who go every morning and sit in some known place to give their remedies to such as enquire for them, whether they may be portions or plasters<sup>17</sup>”. It is possible that these men might also be sellers of herbs and other drugs.

Covering the broken teeth with cap was known to the physicians. There is a very popular story in which Tenali Ramakrishna Kavi got one of his broken teeth replaced by a cap made with deer – horn.

A French Traveller Moseothena visited the Kingdom of Golconda during the reign of Abdulah Qutub Shah, and praised the treatment of Colic of *agnikarma* (cautery) and described many methods of *agnikarma* and minute differentiations among them<sup>18</sup>. *Parahita Samhita* also refers to cautery to the new born.

### **Drugs and their availability**

Physicians of higher castes did not eat meat and other prohibited animals products, but they used animals products as medicines. Linchoten, the Dutch traveller observes that Brahmanas did not take meat and other prohibited animals products but fed themselves with rice even when they were sick, they used only herbs. But, he refers to their extensive use of animal products like gorcana, civet cat's secretion and others in therapeutics.

He writes : “they (Brahmins) eat not anything that has life, but feed themselves with herbs and rice, neither yet when they are sick but heal themselves by herbs and ointments and by rubbing their bodies with sandal and such like sweet wood<sup>20</sup>”.

Common people, specially women used to collect necessary useful herbs when they were available from the nearby surroundings for use to cure simple ailments. Tavernier writes “as for the common people, after the rains are fallen and it is time to gather herbs, you shall see every morning the good women of the town going into the field to gather such simples which they known to be

roper for such diseases as reign in the family<sup>21</sup>”.

Tavernier also refers to some stones which have medicinal value. Porcupine stone which was said to be carried on its head by that creature is more precious than bezoar against poison. He also refers to serpent stone<sup>22</sup>. John Fryer also refers to the use and popularity of Goa stones in various diseases<sup>23</sup>.

Apart from some particular that used to dispense potions and plasters, as recorded by Tavernier, there was a separate community, who sold herbs and other drugs and they were called ‘*Mandulavallu*’ in Andhra. The word ‘*mandulavallu*’ means ‘medicine-men’ or ‘medicine – sellers’. This community is referred to in some literary sources like *Hamsavimsati*, and it is interesting to note that there still exist some families by this name. Linchoten mentioned that Brahmins were also in this field<sup>24</sup>.

There are some evidences to show that several drugs used in medicines were imported from different countries. Cloves, Cardamom and Cinnamon were imported from Sumatra and Ceylon (Srilanka). Though they were also available in the country, the imported drugs were of better quality<sup>25</sup>. Borneo and Sumatra supplied major part of the camphor required for the Vijayanagara kingdom. The Dutch brought the Japanese and Chinese Camphor to Masulipattinam<sup>26</sup>.

Water melons, sulphur, sandalwood and red sandalwood were brought from Java<sup>27</sup>. Opium was imported from China<sup>28</sup>. The following substances were brought by the Dutch merchants from Holland or South East Asian countries. Cloves, nutmeg, mace, tortoise horn, alum, sandalwood,

saffron, lead, Japanese camphor, Chinese camphor, benzoin, mercury etc<sup>29</sup>.

Like the present day situation, adulteration also was prevalent in these days. Barbosa mentioned that camphor was in great demand since it was used as a drug as well as a spice in daily life. He goes on to describe “One pound weight of Camphor from Barneo is as deemed as a hundred pounds of China camphor. But the Indian who know how to mix them, adulterate of the best as they do all other merchandise, being as dexterous, at that work as any people in the world, so that one must be very cunning and have a great deal of experience not to be deceived<sup>30</sup>”.

### **Number and remuneration**

Tavernier narrates that in Karnataka, Bijapur and Golconda and other places “there were no physicians but such as attend kings the princes” and also that there are no physicians in villages and that the common people cured their petty diseases in their homes only by taking drugs given by elderly women<sup>31</sup>.

This may be due to his incomplete observation and can be disproved. He himself at another place refers to priest physicians<sup>32</sup>. Linchoten who visited India in 16<sup>th</sup> century refers to the existence of several physicians<sup>33</sup>.

Some grants to the famous physicians mentioned earlier suggest their high status. Aggalagya is a physician-surgeon, who was given a status equal to that of the minister and Aggalagya himself constructed now Jaina *basadis*<sup>34</sup>. Several other grants to and by the physicians speak of their high status in the society. There was also a view that physicians should not be paid highly lest they may neglect their profession.

*Amuktamalyada*, a literary work attributed to Krishnadeveraya of Vijayanagara, states that physicians should be given enough to sustain and if they are given more they may neglect the welfare of the people and as a result of it disease may spread in the country<sup>35</sup>.

*Palanativiracaritra* by Srinath has a reference where 500 madas were paid to the women, who was wounded by the hitting of a toy<sup>36</sup>. This amount appears quite high as

compared to the injury. Tavernier also records that 800 *pagodas* were given to the European physician by Abdul Hasan Qutub Shah for doing venesection at four places<sup>37</sup>.

But it is also found that in medieval period physicians served the society with a humanitarian feeling. They were called *parahitas* and *lokopakras* as evident from the inscriptions etc. The kings in turn gifted grants to them in consideration of their services to the society.

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